This form is semi-interactive. It can be filled out on line but must be mailed or faxed to this agency. Wages must be rounded to the nearest whole dollar amount.

## **EMPLOYER'S QUARTERLY WAGE REPORT - CONTINUATION SHEET**

MAIL OR FAX TO: LOUISIANA DEPARTMENT OF LABOR
OFFICE OF REGULATORY SERVICES
P O BOX 94100

				BATON ROUGE LA. FAX NO: 225-342-58			
2. Due Date	3 State ID. No.	4. Year/Quarter	5. Federal ID. Number	6. SHEET NUMBER		OF	
7. EMPLOYEE SOC. SEC. NUMBER 8.		8. EMPLOYEE TOTAL WAGES (no cents)		9. EMPLOYEE NAME (first initial, last name)			
				10. Total this page			

NOTE: The total of this page and each additional continuation sheet must included in the sum total on Line 11 of the Employer's Quarterly Wage Report.

1. EMPLOYER NAME, DBA & ADDRESS